

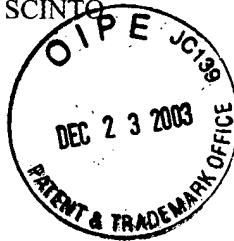
PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE
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 05514 7590 09/23/2003

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(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/865,549	05/29/2001	Takaharu Kondo	35.C15381	4019

TITLE OF INVENTION: METHOD OF FORMING SILICON-BASED THIN FILM

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1300	\$300	\$1600	12/23/2003

EXAMINER	ART UNIT	CLASS-SUBCLASS
CHEN, BRET P	1762	427-574000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Fitzpatrick, Cella, Harper
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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

CANON KABUSHIKI KAISHA

TOKYO, JAPAN

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☐ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee
- ☒ Advance Order - # of Copies 15-120

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- ☒ A check in the amount of the fee(s) is enclosed.
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(Authorized Signature)

(Date)

Jason M. Chan (Reg No. 48,512) 12/22/03

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12/31/2003 RHARIS2 00000068 09865549

01 FC:1501	1330.00 OP
02 FC:1504	300.00 OP
03 FC:8001	15.00 OP

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